SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Addressee  B. Received by (Plinted Name)  C. Date of Delivery  C. T. S. D. S. D. Is delivery address different from item 12 Yes
1. Article Addressed to:  Town of Cottonuod  Mayor Lomax Smith C/O  1414 Metcalf Street	If YES, enter delivery address below:
Cottonwood, AL 36320	3. Service Type  Certified Mail  Registered Insured Mail  C.O.D.
1:05W1213-C5+C	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7005 25	70 0001 4878 6226
70 - 2011 February 2004 Domestic Re	turn Receipt 102595-02-M-1540